A Parent’s Guide to
Speech & Communication Challenges in Young Children
How Common Are Speech Disorders?

According to the American Speech-Language-Hearing Association (or ASHA), speech sound errors are quite common in young children learning to speak. It’s a common part of the learning process! But these errors should fade over time as a child’s language skills develop. By the age of 8, children should be able to produce all sounds in English correctly.
Hello, Parents!

Thank you for downloading this eBook. We hope it provides a valuable reference for you as you investigate your child’s speech and communication ability. It is normal to wonder if your child is achieving the recommended speech development milestones when he is supposed to, or if there is cause for concern.

This book will give you background on several of the most common types of speech and communication challenges that children face and provide several references for learning more. If you suspect that your child may present a speech or communication challenge, know that you are not alone! Communication disorders are among the most common disabilities in the United States. You child’s current and future success in overcoming these challenges can be greatly improved by identifying the specific disorder(s) your child faces, understanding the cause, and following-through with a consistent treatment plan.

If you have any questions as you go through this guide, let us know! We’re here to help.

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READ MORE: Will My Child Outgrow His Speech Impediment?
**What is an Articulation Disorder?** An Articulation Disorder is when your child has difficulty creating or forming speech sounds correctly. Sounds may be omitted or improperly altered during the course of speech. The most common articulation disorders are “lisps,” when the “S” sound is pronounced incorrectly or when a child substitutes a “W” for an “R” sound so he says “wabbit” instead of “rabbit” or “buhd” or instead of “bird.” 

The most common Articulation Disorders present themselves when your child is between the ages of three and six. As different sounds are mastered at different stages in a child’s development, the appropriate age to begin seeking treatment will depend on the sound that your child is having difficulty pronouncing.

[Learn More About Articulation Disorders >](#)
**What is Apraxia of Speech?** Apraxia of Speech is a communication disorder that can affect your child’s motor programming system for speech production. For kids with apraxia of speech, producing sounds can be difficult, specifically in sequencing and forming sounds. Your child may know what he wants to say, but there is a disruption in the part of the brain that sends the signal to his muscles for the movement necessary to produce the sound. Because the signals are delayed, your child may have difficulty with articulation, intonation, speaking stress or rhythm errors.

There are two types of Apraxia of Speech. Developmental Apraxia, which can occur in your child at birth and Acquired Apraxia, which occurs in adults or a child as a result from a brain injury or illness.

[Learn More About Apraxia of Speech >>](#)
What is Autism? Autism Spectrum Disorder (ASD) is an umbrella term to describe “a disorder of neural development” and has three different classifications: Autism, Asperger’s Syndrome and Low Functioning Autism. If your child is on the Autism Spectrum, his ability to communicate will vary, depending upon his intellectual and social development. Some children with ASD may be unable to speak. Most children with Autism have little or no problem pronouncing words. The majority, however, have difficulty using language effectively, especially when they talk to other people. Many children with ASD have problems with the meaning and rhythm of words and sentences or may be unable to understand body language and the nuances of vocal tones.

Autism may become apparent in your child at about six months of age, though they may be functioning normally, then regress between one and two years of age.

Learn More About Autism >>
Cerebral Palsy

**What is Cerebral Palsy?** Cerebral Palsy is a group of disabilities that affect the motor control of child and has three classifications: Spastic, Ataxic and Athetoid. The defining characteristic of Cerebral Palsy is abnormal muscle tone. Speech and communication disorders are a common symptom in children with cerebral palsy. If your child has Cerebral Palsy, they may have a limited range of motion and slow movement, fine motor skills can be difficult to control. This can cause problems with production of sounds and formation of words and phrases.

Cerebral Palsy is generally diagnosed within the first 6-9 months of your child’s life. In some cases Cerebral Palsy may develop after birth, brought on by poisoning by toxins or lead, physical brain injury and meningitis.

[Learn More About Cerebral Palsy >>](#)
What is Cleft Palate? A cleft lip or cleft palate is a facial and oral malfunction that occurs during a child’s fetal development. A cleft lip or palate can be a small indentation at the top of the lip or can continue into the nasal cavity on one or both sides of the mouth. Children with a cleft lip or cleft palate may also have trouble speaking, his voice may take on a nasal sound, and his speech may be difficult to understand. Children with cleft palate are often born with narrow Eustachian tubes in the middle ear, which can make fluid build-up. This may affect your child’s ability to hear clearly, leading to language processing problems and delayed ability to understand spoken language.

Diagnosis can take place before the baby is born during an ultrasound or when your baby is born. A cleft lip may require one or two surgeries depending on the extent of the repair needed. The initial surgery is usually performed by the time a baby is three months old.
What is Down Syndrome? Down syndrome is caused by the presence of an extra copy of chromosome 21. Children with Down syndrome have a severe delay in her cognitive abilities, physical growth, and often exhibit unique facial and physical characteristics. Language skills are greatly impacted and children with down syndrome commonly have a speech delay as well as difficulty understanding and expressing his speech. Early intervention and individualized speech therapy can help your child target speech errors, increase intelligibility, and encourage literacy skills.

Down syndrome causes delay in vocalization and language acquisition causing some children to not start speaking until 24 to 36 months. Speech delays and associated problems generally stem from poor muscle tone in the area around the mouth can make it hard for your child to pronounce sounds correctly. Hypotonia also leads to feeding and swallowing problems. Children with Down syndrome are often born with narrow Eustachian tubes in the middle ear, which can make fluid build-up. This may affect your child’s ability to hear clearly, leading to language processing problems and delayed ability to understand spoken language.

Learn More About Down Syndrome >>
Fragile X Syndrome

What is Fragile X Syndrome? Fragile X Syndrome is an inherited genetic disorder that is the most common cause of inherited intellectual disabilities in boys. It also affects girls, though their symptoms tend to be milder. Intellectual disabilities, speech and language problems, and social anxiety occur most frequently in children with Fragile X Syndrome. If your child has Fragile X Syndrome, he may repeat words and phrases, his speech may have cluttered speech and difficulties with the pragmatics of speech.

Fragile X Syndrome occurs when there is a mutation in the FMRI gene and is an inherited disorder. If a child received a permutated X chromosome from one of his parents (as a carrier), then he is at greater risk of developing FXS. Diagnosis is not always easy and early signs of the disease are hard to detect. DNA tests can determine whether a child has inherited Fragile X Syndrome.

Learn More About Fragile X Syndrome >>
What is a Language Disorder? A language disorder is when your child has trouble understanding others, sharing thoughts, ideas, and feelings completely. Language disorders can be classified in three ways: Expressive Language Disorder (ELD), Receptive Language Disorder (RLD) or expressive-Receptive Language Disorder (ERLD). If your child has Expressive Language Disorder (ELD), he will not have problems producing sounds or words, but may not have the ability to retrieve the right words and formulate proper sentences. If your child has Receptive Language Disorder (RLD), he will have difficulties comprehending spoken and written language. Finally, if your child has Expressive-Receptive Language Disorder (ERLD), he will exhibit both kinds of symptoms.

Problems with language skills usually begin before age four. Some mixed language disorders are caused by a brain injury, and these are sometimes misdiagnosed as developmental disorders. Language disorders may occur in children with other developmental problems, autistic spectrum disorders, hearing loss and learning disabilities.

Learn More About Language Disorders >>
**Speech Delay**

**What is a Speech Delay?** A speech delay refers to a delay in either the development or mechanisms necessary to produce speech. If your child has a speech delay, he may have difficulty using his lungs, vocal chords, mouth, tongue or teeth to produce sounds. This may make your child slow to pick up words and lack the ability to shape his mouth and tongue in the formation of words. Other speech delays may be caused by oral-motor dysfunction, which is a lack or delay in the area of the brain that speech is formed and created and communicated to the mouth and tongue. Children with Autism Spectrum Disorders, Auditory Processing Disorder, prematurity, and hearing loss will likely also exhibit speech delay.

Speech delays are usually noticed by watching the milestones of language development with your child. If your child is not saying three to five words by his first birthday or is unable to produce 15-20 words by 15 months of age, he most likely suffers a speech delay.

[Learn More About Speech Delay >>](#)
**What is Stuttering?** Stuttering occurs when your child’s speech is disrupted by involuntary repetitions, prolonging of sounds and hesitation or pausing before speech. Stuttering can be developmental, meaning it begins during early speech acquisition, or acquired due to brain trauma. Generally, there are three symptoms of stuttering that your child may exhibit: repetition of a sound or syllable ("I be-be-believe"), a prolongation of a sound ("My name is Mmmike") or a speech block occurs hindering movement of tongues or lips.

No one knows the exact causes of stuttering in a child. It is considered to have a genetic basis, but the direct link has not yet been found. A child who stutters is typically not struggling with the actual production of the sounds—stress and a nervousness trigger many cases of stuttering. Stuttering is variable, meaning if the speaker does not feel anxious when speaking, the stuttering may not affect their speech.

Stuttering typically begins after your child has started to use language, so it is not typically diagnosed until your child is one and a half to two years old. No one knows the exact causes of stuttering in a child. It is considered to have a genetic basis, but the direct link has not yet been found.
What Next?

Now that you’ve learned more about the different types of speech and communication challenges, we’ve got a few suggestions on what to do next:

- **Visit with your child’s pediatrician.** A baseline health exam is important to understand health or behavior conditions your child may be experiencing.
- **Learn as much as you can about typical speech development.** Speech and language development can be better understood by following guidelines that are by age-appropriate for your child. The National Institute on Deafness and Other Communication Disorders (NIDCD) offers a helpful checklist.
- **Be patient and take turns in conversations.** This is always a good rule of thumb when it comes to helping children develop communication skills. Give your child the time to complete sounds and sentences without feeling rushed.
- **Look for an experienced Speech Language Pathologist (SLP).** Treatment for a speech or communication disorder depends heavily on a thorough assessment by an SLP. Some of the skills you might learn from an SLP to help you with your child include:
  - Creating awareness without criticism, sometimes done by recording your child’s speaking and helping them mark the times where the word ends are repeated
  - Developing relaxation techniques for calmer breathing and speaking
  - Helping to develop healthy speech pacing where your child finds a more effective rhythm for speaking
Support for parents is a crucial component when it comes to parenting children with a challenge or disability and developing an established network can be your safety net when you’re searching for answers. Below are few resource to help you find your footing and have some fun and build communication skills in your child:

- Communication Milestones for Early Elementary Years
- Speech Disorders and Kids: Finding Support for Parents
- What You Need to Know if Your Child is Starting Speech Therapy
- The Most Common Articulation Disorders
- 7 Ways to Build Confidence in Kids with Speech Disorders
- Strategies to Improve Social Communication Skills